

NOTES

HEALTHY PEOPLE 2010 GOAL:

- Increase the percentage of high school seniors who remain alcohol and drug free to 29% and 56%, respectively.
- Increase to 80% the proportion of adolescents aged 12-17 who perceive a great risk associated with substance abuse.
- Increase the proportion of middle, jr. high and senior high schools that provide comprehensive school health education to prevent tobacco, alcohol and other drug use and addiction to 95%.

RELATED

INDICATORS:

- Substance-exposed Infants
- Sexually Transmitted Diseases
- Mental Health Services
- Juvenile Arrest Rates

Indicator

Adolescents receiving publicly funded substance abuse treatment

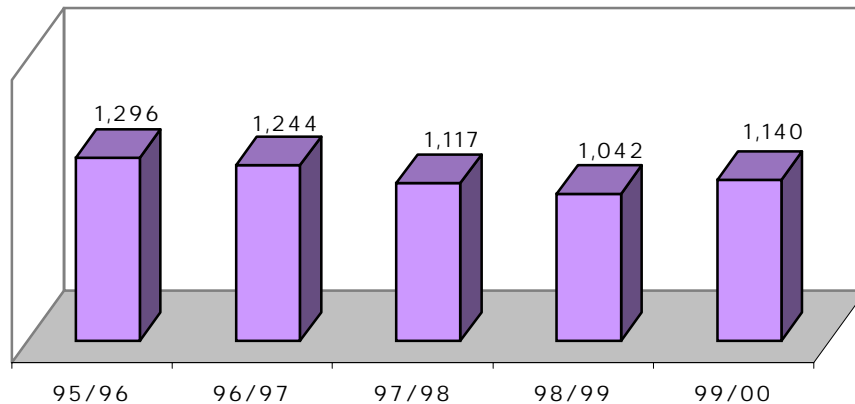
Definition

Number of adolescents using substance abuse prevention, treatment, and/or resource linkage services provided by the Orange County Health Care Agency.

Findings

During 1999/00, 1,140 adolescents received publicly funded treatment for alcohol and drug abuse in Orange County. Of this total, 1,078 (95%) received outpatient treatment, recovery, and detoxification services, and 62 (5%) received residential treatment. The majority of those who received treatment were male, 76% vs. 24% female. An additional 1,256 adolescents received other specialized education, prevention, linkage and treatment services in Juvenile Probation and Social Services Agency facilities during 1999/2000, for a total of 2,334 receiving services.

Adolescents Receiving Treatment*



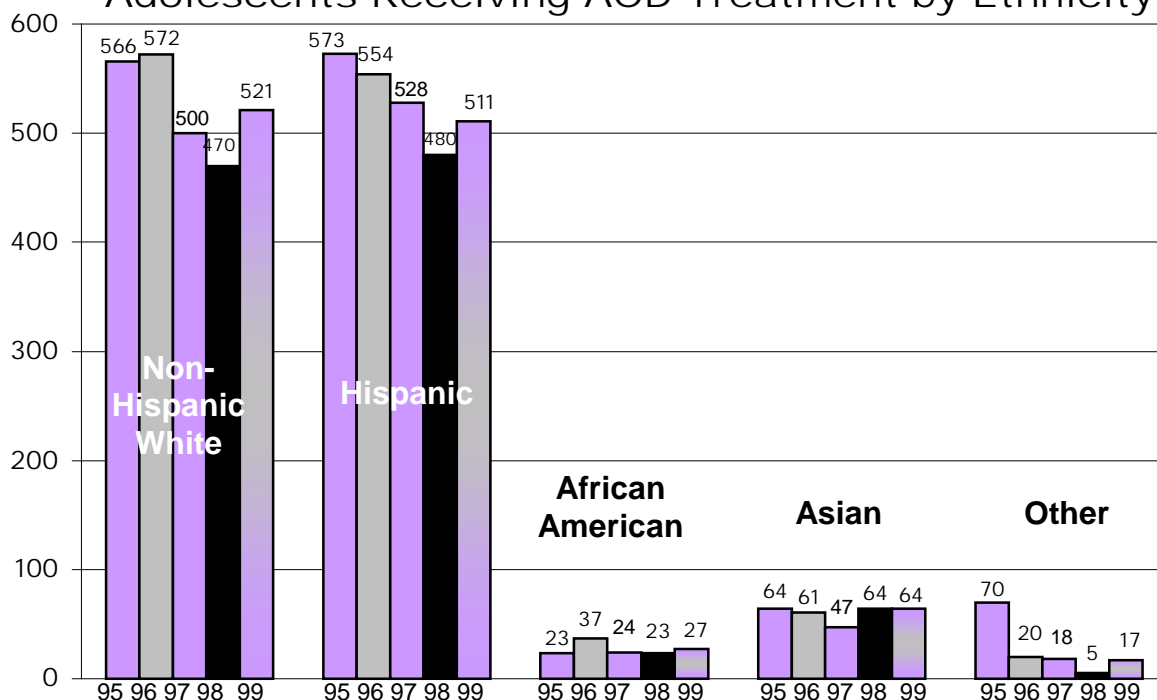
*Based on figures from "Adolescents using services by race, ethnicity and gender"

Trends

From 1995/96 to 1998/99, there was a slow downward trend in the number of adolescents receiving services, falling from 1,296 to 1,042 in 1998/99. However, in 1999/00 there was a slight increase in the number of adolescents receiving treatment, up 98 from the 1,042 adolescents served in 1998/99. Of all ethnic groups, Hispanic adolescents have had the largest decline in treatment between 1995/96 and 1999/2000, falling from 573 to 511 cases - an 11% decrease. Non-Hispanic White youth had the second largest decline in treatment, 8%, from 566 to 521 cases in that same 5-year period. Asians remained the same. African Americans were the only group to exhibit a slight increase in service use from 23 to 27, a 17% increase. Decreases in service utilization can be explained, in part, by changes in funding procedures and a change in focus to target the most intensive intervention efforts at the highest-risk youth, e.g. adolescents that are most at-risk for chronic substance abuse, escalating criminal involvement, and placement difficulties.

SUBSTANCE ABUSE TREATMENT

Adolescents Receiving AOD Treatment by Ethnicity



Summary

Alcohol and drug use is often under-reported, available data are limited and/or partial, and the actual incidence of adolescent substance abuse in Orange County is currently not tracked regularly and reliably. Most teen substance abuse information comes from adolescents actively engaged in treatment at County-operated facilities, from juveniles within the criminal justice system and/or self-reports of minors themselves. Currently, there is a need for reliable, consistently measured data about substance abuse among County children and adolescents, not just those who are arrested or in treatment. Consequently, there is a dearth of accurate and reliable data needed to plan and allocate resources most effectively to address this problem. Although juvenile felony arrests for drug crimes were down, juvenile misdemeanor substance abuse-related arrests continue to climb (see page 127), and alcohol and drug use are pervasive among juveniles in custody for robbery, burglary, assault and other similar offenses. Given these limitations, planning for adolescent substance abuse treatment needs is very complicated and challenging.

Implications

The illicit use of alcohol and other drugs puts adolescents at increased risk for health and developmental problems, educational failure, socially deviant and criminal activities, and a myriad of other dangers. Drug use and alcohol consumption are both precursors and covariants of low self-expectations, poor academic performance and lack of parental and community supports. Parental substance use and high risk activity at an early age are often the best predictors of adolescent alcohol consumption and other drug use.²

NOTES



SEE
SUPPLEMENTAL
TABLES FOR
ADDITIONAL
DATA

NATIONWIDE:

- In 1999, 24% of eighth-graders, 40% of tenth graders and 51% of twelfth graders report they had consumed alcohol during the past month.
- 28.3% of eighth graders and 54.7% of twelfth graders reported trying an illicit drug, with marijuana being cited most often.
- Approximately 18% of eighth graders, 26% of tenth graders and 35% of twelfth graders currently smoke, which is defined as having one or more cigarettes in the past 30 days.¹

DATA SOURCE:
Orange County
Health Care
Agency, Alcohol &
Drug Abuse
Services

NOTES:

¹The State of
America's Children
Yearbook, 2000

²In the Wake of
Child Maltreatment,
OJJDCP Juvenile
Justice Bulletin,
1997

SUPPLEMENTAL TABLES: GOOD HEALTH

Indicator

Substance Abuse (Drug, Alcohol, and Tobacco)¹

Number and Percent of Adolescents Using Services by Drug of Choice and Age

Year and Age	Drug of Choice							
	Alcohol	Metham- phetamine	Cocaine	Marijuana	Hallucinogen/ PCP	Heroin	Other*	Total
1994/95								
13-14	93	62	13	219	8	2	5	402
15-17	397	176	200	589	48	66	8	1,484
Percent	26%	12.7%	11%	43%	3%	3.6%	.7%	100
1995/96								
13-14	62	47	2	163	3	2	5	284
15-17	235	167	30	516	19	38	7	1,012
Percent	23%	16.5%	2.5%	52%	2%	3%	1%	100%
1996/97								
13-14	161	42	8	233	3	8	10	465
15-17	179	98	19	395	6	43	13	753
Percent	27.9%	11.5%	2.2%	51.6%	.7%	4.2%	1.9%	100%
1997/98								
13-14	110	62	6	220	3	7	8	416
15-17	160	134	15	308	6	52	10	685
Percent	24.5%	17.8%	1.9%	47.9%	.8%	5.4%	1.6%	100%
1998/99								
13-14	45	14	6	83	4	1	0	152
15-17	200	113	25	500	8	28	1	882
Percent	23.65%	12.26%	2.99%	56.37%	1.16%	2.80%	.10%	100%
1999/00								
Under 13	4	0	0	8	0	0	0	12
13-14	32	12	2	96	0	5	9	156
15-17	209	98	25	528	12	29	71	972
Total	245	110	27	632	12	34	80	1,140**
Percent	21.5%	9.6%	2.4%	55.4%	1.1%	3.0%	7.0%	100%

¹This information is based on the California Alcohol and Drug Data System (CADDs). Discrepancies in totals across tables for this indicator are due to missing data from underreporting by the providers in certain areas who report to CADDs, like drug of choice or referral source.

*Includes inhalants, amphetamines, sedatives, stimulants, and over the counter drugs.

**Total does not include 1,256 adolescents who received specialized education, prevention, linkage and referral services in connection with the Probation Department.

Source: Orange County Health Care Agency.

SUPPLEMENTAL TABLES: GOOD HEALTH

Number and Percent of Adolescents Using Services by Race and Ethnicity and Gender

Year and Gender	Race/Ethnicity						
	Non-Hispanic White	Hispanic	African American	Native American	Asian	Other	Total
1994/95							
Male	654	345	28	5	42	40	1,114
Female	396	287	19	4	32	34	772
Frequency	1,050	632	47	9	74	74	1,886
Percent	56%	33%	2%	1%	4%	4%	100%
1995/96							
Male	264	307	4	0	48	51	674
Female	302	266	19	0	16	19	622
Frequency	566	573	23	0	64	70	1,296
Percent	44%	44%	2%	0%	5%	5%	100%
1996/97							
Male	343	332	22	3	39	9	748
Female	229	222	15	2	22	6	496
Frequency	572	554	37	5	61	15	1,244
Percent	46%	45%	3%	1%	4%	1%	100%
1997/98							
Male	319	336	15	2	30	9	711
Female	181	192	9	1	17	5	405
Frequency	500	528	24	3	47	14	1,117
Percent	45%	47%	2%	1%	4%	1%	100%
1998/99							
Male	311	345	16	3	49	0	724
Female	159	135	7	2	15	0	318
Frequency	470	480	23	5	64	0	1,042
Percent	45%	46%	2%	.5%	6%	0	100%
1999/00							
Male	383	397	22	2	48	10	862
Female	138	114	5	1	16	4	278
Frequency	521	511	27	3	64	14	1,140*
Percent	46%	45%	2%	.3%	6%	1%	100%

*Total does not include 1,256 adolescents who received specialized education, prevention, linkage and referral services in connection with the Probation Department.

Source: Orange County Health Care Agency.

SUPPLEMENTAL TABLES: GOOD HEALTH

Number and Percent of Referrals to Treatment by Resource

Year	Type of Service						
	School	Family/ Self	Legal System	Hospital Program	Health Care Programs*	Other Community Referral*	Total
1994/95							
Number	685	377	434	390	NA	NA	1,886
Percent	36%	20%	23%	21%	NA	NA	100%
1995/96							
Number	384	391	283	238	NA	NA	1,296
Percent	30%	30%	22%	18%	NA	NA	100%
1996/97							
Number	583	221	359	**	47	20	1,230
Percent	47%	18%	29%	**	4%	2%	100%
1997/98							
Number	362	178	498	**	48	28	1,114
Percent	32%	16%	45%	**	4%	3%	100%
1998/99							
Number	240	124	592	**	37	43	1,036
Percent	23%	12%	57%	**	4%	4%	100%
1999/00							
Number	185	136	704	**	39	76	1,140***
Percent	16%	12%	62%	**	3%	7%	100%

*New Category.

**This data is no longer collected.

***Total does not include 1,256 adolescents who received specialized education, prevention, linkage and referral services in connection with the Probation Department.

Source: Orange County Health Care Agency.

SUPPLEMENTAL TABLES: GOOD HEALTH

Number and Percent of Adolescents Treated by Type of Service

Year	Type of Service		
	Out-Patient	Residential	Total
1994/95			
Number	1,704	182	1,886
Percent	90%	10%	100%
1995/96			
Number	1,162	134	1,296
Percent	90%	10%	100%
1996/97			
Number	1,098	138	1,236
Percent	89%	11%	100%
1997/98			
Number	995	122	1,117
Percent	89%	11%	100%
1998/99			
Number	928	79	1,007
Percent	92%	8%	100%
1999/00			
Number	1,078	62	1,140*
Percent	95%	5%	100%

Number and Percent of Discharge Status

Year	Type of Service				
	Completed Treatment	Left with Satisfactory Progress	Left with Unsatisfactory Progress	Referred/ Transferred	Total
1994/95					
Number	75	31	68	8	182
Percent	41%	17%	37%	5%	100%
1995/96					
Number	104	57	62	22	245
Percent	43%	23%	25%	9%	100%
1996/97					
Number	283	339	415	88	1,125
Percent	25%	30%	37%	8%	100%
1997/98					
Number	212	267	376	57	912
Percent	23.2%	29.3%	41.2%	6.3%	100%
1998/99					
Number	164	174	462	85	885
Percent	18.5%	19.7%	52.2%	9.6%	100%
1999/00					
Number	202	186	548	50	986*
Percent	20%	19%	56%	5%	100%

*Total does not include 1,256 adolescents who received specialized education, prevention, linkage and referral services in connection with the Probation Department.

Source: Orange County Health Care Agency.